

Interviewee/Employee Self Certification Form

Employer: Enter Employer Name

Project Site: Enter Municipality (County: Kewaunee)

Contract ID: Enter Contract ID

Enter Business or UGLG Name is collecting the following information as a result of participating in the U.S. Housing and Urban Development's (HUD) Community Development Block Grant (CDBG) program. CDBG is a federally-funded program administered jointly by the State and a participating unit of local government, in this case Enter UGLG.

To meet federal regulations, Enter Business or UGLG Name is required to collect statistical data on your family income, race/ethnicity, and employment status. This information is reported to HUD and eventually used by the U.S. Congress to measure the effectiveness of the CDBG program. Your name and personal information will be kept private, and your income, race and unemployment status information only shared with the federal government anonymously. **It is only through your cooperation that your community can benefit from this federal program.**

INSTRUCTIONS:

Please complete all information below. If you are applying for a job, please use your current information. If you are completing this form after accepting a position, please complete the form based on your family size and annual income directly before accepting your position. Note that "Family" means all related persons in your household.

Family Size: _____

Annual Gross Family Income: _____

Please indicate your race:

- ☐ White
- ☐ Black/African American
- ☐ Asian
- ☐ American Indian/Alaskan Native
- ☐ Native Hawaiian/Other Pacific Islander
- ☐ Other/Multi

Please indicate your ethnicity:

- ☐ Hispanic or Latino
- ☐ Non Hispanic or Latino

Are you currently unemployed?

- ☐ Yes
- ☐ No

I certify that the information provided above is correct to the best of my knowledge.

Printed Name

Signature

____/____/____
Date

EMPLOYER/LOCAL GOVERNMENT USE ONLY (ALL SECTIONS ARE MANDATORY)

Position Details

- ☐ Full Time ☐ Part Time (FTE: _____) ☐ Employer-Sponsored Healthcare Plan Offered

Position Class

- | | | |
|--|--|---|
| <input type="checkbox"/> Official/Manager | <input type="checkbox"/> Professional | <input type="checkbox"/> Office/Clerical |
| <input type="checkbox"/> Sales | <input type="checkbox"/> Technician | <input type="checkbox"/> Craft Worker/Skilled |
| <input type="checkbox"/> Operative/Semiskilled | <input type="checkbox"/> Laborer/Unskilled | <input type="checkbox"/> Service Worker |

Applicant Income Categorization:

Please indicate a hire decision, as well as the median family income group the applicant falls into based on Housing and Urban Development Section 8 incomes in your county, using the year in which the applicant was interviewed.

Incomes for your area can be found at <http://www.huduser.org/portal/datasets/il.html>.

Hire Decision

- ☐ No Offer of Employment Made
- ☐ Position Offered to Applicant

Applicant Income

- ☐ Non-Low/Moderate (>80% County Median Family Income)
- ☐ Moderate Income (<=80% County Median Family Income)
- ☐ Low Income (<=50% County Median Family Income)
- ☐ Very Low Income (<-30% County Median Family Income)